Section III:	AVR Verification Process	Year:		Multi-Site ID#:	
	D number and indicate by check mark which methodolo		Page:	of:	pages
stored/filed.	n box D indicate the exact location where survey docun	ientation is	Photoc	opy this page as nee	ded

Site ID #	A) District Approved AVR Survey documentation*	B) Record Keeping* (Attach 12 mo survey documentation)	C) Random Sample Survey*	Documentation Location

^{*(}A) If selected complete all sections regarding AVR information/calculation.

Requires written AQMD approval prior to usage. Must complete all sections regarding AVR information including Section III-B, page 6. Requires written AQMD approval prior to usage. Must complete all sections regarding AVR information including Section III-C, page 6. *(B)

^{*(}C)